

MassHealth Drug List Updates

Archives

Original posting date, August 9, 2002; Effective September 3, 2002

Updates to the List for September 3, 2002

1. New Prior-Authorization Requirements

The following prior authorization requirements take effect on September 3, 2002. The Division's policy permits a valid prescription written before September 3, 2002, for any nonsteroidal anti-inflammatory drug (NSAID) with new prior-authorization requirements, to be filled or refilled for the life of the prescription without prior authorization. Nevertheless, the Division encourages prescribers to consider switching their MassHealth patients to NSAIDs that do not require prior authorization, as soon as possible, when clinically appropriate to do so. This may prevent future disruptions in therapy.

Ponstel (mefenamic acid) – PA

Mobic (meloxicam) – PA < 60 years

Arthrotec (diclofenac/misoprostol) – PA < 60 years

Bextra (valdecoxib) – PA < 60 years

Celebrex (celecoxib) – PA < 60 years

Vioxx (rofecoxib) – PA < 60 years

See [Table 11](#), for further information about NSAIDs.

2. New Prior-Authorization Request Forms

[Nonsteroidal Anti-Inflammatory Drugs Prior Authorization Request](#)

[Tracleer \(bosentan\) Prior Authorization Request](#)

3. New Drug on the List

[NuvaRing \(etonogestrel/ethinyl estradiol\) – PA](#)

4. Corrections

- **Additions:** The following drugs have been added to the MassHealth Drug List. These drugs had inadvertently been omitted from the list, and do not reflect any change in the Division's policy.

AlphaNine SD (factor IX, human)

Bebulin VH Immuno (factor IX complex)

BeneFix (factor IX, recombinant)

factor IX, human

factor IX, recombinant

Konyne 80 (factor IX complex)

meloxicam (Note: This drug was inadvertently omitted from the

MassHealth Drug List, and does not require prior authorization until September 3, 2002, when this and selected other nonsteroidal anti-inflammatory drugs will require prior authorization, as indicated in [Table 11.](#))

Mononine (factor IX, human)
Naprosyn # (naproxen *)
Profilnine SD (factor IX complex)
Septisol (hexachlorophene)
Vanoxide-HC (benzoyl peroxide/hydrocortisone)

- **Corrections to PA Status:** The following drugs have been updated to reflect their correct prior-authorization status. The prior-authorization requirements for these drugs had inadvertently been omitted, and do not reflect any change in the Division's policy.

benzoyl peroxide * – PA > 25 years
benzoyl peroxide/clindamycin
– PA > 25 years
benzoyl peroxide/erythromycin
– PA > 25 years
benzoyl peroxide/hydrocortisone
– PA > 25 years
benzoyl peroxide/sulfur – PA > 25 years
Benzacilin (benzoyl peroxide/clindamycin)
– PA > 25 years
Benzamycin (benzoyl peroxide/erythromycin)
– PA > 25 years
Clindagel (clindamycin) – PA > 25 years
Sulfoxyl (benzoyl peroxide/sulfur)
– PA > 25 years
Pilocar # (pilocarpine)

- **Deletion:** Hydroquinone has been deleted from the MassHealth Drug List. It was listed in error. This deletion does not reflect any change in the Division's policy.

[Back to Top](#)

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